PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10700359

Ellicotive Cotober 1, 2000												
		CLAIMS AS	S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			55					RATE	FEE		RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			55 minus 20=		* 35			X\$ 9=		OR	X\$18=	630
INDEPENDENT CLAIMS			7 minus 3 =		* 4			X43=	-	OR	X86=	344
MULTIPLE DEPENDENT CLAIM P			RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than				ero, enter "0" in column 2			,	TOTAL		OR	TOTAL	1744
	C	LAIMS AS A	MENDED - PART II (Column 2) (Column 3)					SMALL	ENTITY	OR	OTHER SMALL	
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus			= -		X43=		OR	X86=	<u>·</u> _
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE		4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 0: 4!!4	=		X43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
· · · · · · · · · · · · · · · · · · ·										OR	TOTAL ADDIT. FEE	
ADDIT. FEE												
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR_	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		1	.000	
and the same of th										OR	+290=	
*	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 									OR	ADDIT. FEE	<u></u>
ı –	Ti the Trignest Nu	moer Previously P	aud Por IN IF	uo orace	ill coorce ca .	alio, eller o. A bishact numbe	or fo	und in the en	orooriate b	ox in c	olumn 1.	